PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/507,025			ling Date 25/2 <b>00</b> 5	To be Mailed
	AF	PPLICATION	D – PART I 1)	_	SMALL ENTITY			OTHER THAN OR SMALL ENTITY			
	FOR	N N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b), c	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), o	or (m))	N/A		N/A		N/A		]	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p), o		N/A		N/A		N/A		]	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =	
IND (37	DEPENDENT CLAIM CFR 1.16(h))		minus 3 =		٠		x \$ =		]	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ets of pape 250 (\$125 tional 50 s	ngs exceed 100 ion size fee due v) for each on thereof. See 7 CFR 1.16(s).							
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))		]			]		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								]	TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)											ER THAN ALL ENTITY
μ	10/14/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
AMENDMENT	Total (37 CFR 1.16())	• 24	Minus	<b> 24</b>	= 0	]	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	***3	= 0	1	x \$ =		OR	X \$220=	0
Ĭ.	Application Size Fee (37 CFR 1.16(s))										
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
ᆫ		(Column 1)		(Column 2)	(Column 3)						
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Z I	Total (37 CFR 1,16())		Minus			1	x \$ =		OR	x s =	
N I	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x s =	
Ξ!	Application Size Fee (37 CFR 1.16(s))					1			1		
AMENDMENT	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Γ						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the ontry in column 2, write 0" in column 3.  If the "Highest Number Previously Paid For IR THIS SPACE is less than 30, enter "20".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IR THIS SPACE is less than 3, enter "3".  If th											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the LISPTO to process) an application. Confidentiality is overwined by 80 LSC. 1.22 and 37 CFR. 1.14. This collection is estimated to their bet 2 minutes to complete including gathering, preparing, and submitting the completed application form to the LUSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U. S. Patent and Trademark. Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.